

STATE OF TENNESSEE BUREAU OF TENNCARE DEPARTMENT OF FINANCE AND ADMINISTRATION 310 GREAT CIRCLE ROAD NASHVILLE, TN 37243-1700

January 17, 2006

Dear TennCare Provider:

Each TennCare Health Plan (MCC) is required to submit updated provider information to the Bureau of TennCare on a monthly basis. On a quarterly basis, TennCare's Provider Network Division has performed a telephonic survey validating certain data elements contained within the monthly MCC provider file submission. As part of the new External Quality Review Organization's contract, QSource will now be performing this function on a quarterly basis.

Each quarter, QSource will randomly select a statistically valid sample of providers for each MCC from the TennCare provider data and validate a set of data elements related to member access and provider demographics. QSource will begin contacting providers directly beginning February 1, 2006 to validate the following provider data elements:

- Provider address
- Provider specialty
- Contract status with MCC
- Panel age restrictions
- Telephone number
- Availability of EPSDT services (applies only to PCPs and OB/GYNs seeing children < 21 years)
- Open / closed panel status
- Appointment availability for routine and urgent care
- Prenatal and delivery services (applies to OB/GYN or prenatal providers)

This process assists the Bureau of TennCare in assessing the adequacy of each MCC's provider network and in timely approval of provider directories.

If your office is contacted by a QSource representative, please provide answers relative to the survey. Survey questions will only be to verify information you have already provided to your contracted MCC (see above).

Processes such as these ensure our members access to the most current information and allow the Bureau of TennCare to assess the adequacy of our provider network in a timely manner.

If your MCC profile needs to be updated, please contact a Provider Services Representative at the MCC for assistance.

Sincerely,